Subgrantee Quarterly Report

EMF#	OES Project #	CDFA #	Months Covered	Year	Report #

Project Name	Subgrantee Name	

Subgrantee Telephone #	% of Work Completed	Projected Completion Date

Estimated Draw Down for Next Quarter $	Budget Status (select one)	○ Unchanged ○ Cost Underrun (Explain below) ○ Cost Overrun (Explain below)

Work Schedule Is project proceeding on schedule?	○ Ahead of Schedule (Explain) ○ On Schedule ○ Behind Schedule (Explain below)

General Comments

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Authorized Signature: _____   Print Name: _____ Date: _____

Address: _____

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List all milestones from work schedule including those planned & completed. Describe problems or circumstances affecting completion dates, scope of work, cost, and impacts on any other milestones. Also describe achievements, successes, progress, and special issues.

Milestone #	Projected Start Date	Projected Completion Date	Status
			○ Ahead of Schedule ○ Suspended ○ On Schedule ○ Milestone Completed ○ Behind Schedule ○ Withdrawn

Comments

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			○ Ahead of Schedule ○ Suspended ○ On Schedule ○ Milestone Completed ○ Behind Schedule ○ Withdrawn

Comments

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Comments

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			○ Ahead of Schedule ○ Suspended ○ On Schedule ○ Milestone Completed ○ Behind Schedule ○ Withdrawn

Comments

rev. 4/3/00

(Additional sheets may be used as needed)